	PATENT A	RD	Application or Docket Number  09/849615										
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	ENTITY		OTHE	THAN	1
TOTAL CLAIMS			24		200			RATE	FEE	TOR	RATE	FEE	┨
FOR			NUMBER	FILED	NUME	NUMBER EXTRA			EE 355.00	OR			1
TOTAL CHARGEABLE CLAIMS			24 -mi	nus 20=	• 44			X\$ 9:		1		-	1
INDEPENDENT CLAIMS			.3- m	inus 3 =	6		•	X40=		OR		73.0	P
MULTIPLE DEPENDENT CLAIM P			RESENT		/					OR			ł
* If the difference in column 1 is less than zero, enter "0" in column						column 2		+135:		OR	L		ļ
	7/2 /CLAIMS AS AMENDED - PART II								·	JOR		7820	1
	(Column 2) (Column 3)							SMAL	L ENTITY	OR	OTHER SMALL		\$
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
200	Total	$\cdot$	Minus		$\sim$	•		X\$ 9=		TOR	X\$18=		
AME	Independent		Migurs			•		X40=	1	OR	X80=		1
L	Fino PRES	NTATION OF MI	ULTIPLE DE	PENDENT	CLAIM		,	+135=		1	+270=		1
	e 6 14						ı	101/		OR	TOTAL		ł
	7-0-01	(Column 1)		(Colu	mn 21	(Column 3)	•	ADDIT. FE	Ē	JOR.	ADDIT. FEE	<u> </u>	ł
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		PICH NUM PREVIO PAID	IEST BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
S	Total Independent	-	Minus	77	74	• 0		X\$ 9=		OR	X\$18=		
₹		NTATION OF MI	JLTIPLE DEF	PÉNDENT	CLAIM			X40=		OR	X80=		
								+135=	,	OR	+270=		İ
							L	TOTA		OR	TOTAL ADDIT. FEE		
_	FROM STATE	(Column 1)		(Colur		(Column 3)					ADDIT. FEE		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	••		•	ſ	X\$ 9=		OR	X\$18=		
AM	Independent FIRST PRESE	NTATION OF MI	Minus	ENDENT	01.65	=	r	X40=	<del>                                     </del>	OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						H	.125	1-				
is the entry in column 1 is less than the entry in column 2, write "V" in column 3.											+270=		
		mber Previously Pa ber Previously Pak						DIT. FEE		OR ,	ANNIT EEE		

FORM PTO-875 (Rev. 8/00)